## Workers' Compensation Checklist

### **Presented by**

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# Workers' Compensation Checklist

#### Please review the following checklist:

Internal Claims Management		Yes	No
2. 3. 4.	Are managers / supervisors trained on reporting procedures? Is someone responsible for filing DWC-1's & 5020 reports? Is someone responsible for internal written accident investigations? Is a "First Aid Program" in effect? Does someone periodically follow up with injured employees?**1		
7.	Is modified / alternate work available? Has a medical facility been screened & selected for all locations? Is there a liaison with the medical clinic?		
Ca	ptive Claims Management	Yes	No
2. 3. 4. 5. 6. 7. 8. 9.	Do you know your claims examiner / claims contact? Do you and your managers understand claims reporting procedures? Is your employee contacted promptly after an injury?**1 Do you request status reports on a regular basis? Are you prepared to participate in issues related to reserve changes? Are you prepared to be a "partner" in the claims process? Is an Early Return to Work program in place? Do you know how to "spot" a potential fraud case?**2 Do you know how a suspected fraud case is handled? Do you have access to electronic claims information on line?		
Loss Control / Loss Prevention		Yes	No
2. 3. 4. 5. 6. 7. 8. 9.	Is there an employee primarily responsible for safety? Is a safety incentive program in place? Are employees formally trained? Is the employee training documented? Are you communicating your loss control issues to the captive? Have safety checklist been developed? Are regular, internal, safety inspections performed? Are the inspections documented? Are industrial hygiene services needed? Does your company have a safety committee?		

**Compliance** Yes No

- 1. Is an OSHA log maintained?
- 2. Is a written safety program in place per SB198?
- 3. Is the safety plan customized to your operations?
- 4. Is the safety plan being complied with?
- 5. Are MSDS sheets maintained and available?
- 6. Are all machines and/or equipment in OSHA compliance?

#### Communications\*\*1

Yes No

- 1. Do you have (minimum) weekly contact with the injured employee?
- 2. Do you have a bilingual person to carry out this contact?
- 3. Does this person utilize an initial "sympathetic" approach?
- 4. Is this person trained to provide employee support?

(with the objective of having the employee feel like they do not need an attorney.)

5. Are we documenting these contacts and working with the Captive Management team to deter claims cost increases due to inadequate Communication?

#### Additional:



Fraud Red Flags\*\*2



- 1. History of previous injuries (particularly back injuries).
- 2. Lag time (Over two, three or more days) between date of injury and date injury was reported.
- 3. Injury occurred shortly after being hired.
- 4. You doubt the injury occurred on the job, especially if reported following the weekend or holiday.
- 5. Claimant was laid off just prior to filing a claim or immediately after the incident.
- 6. Claimant requests settlement during early stages of the claim.
- 7. Claimant currently facing family trauma (divorce, death, drugs, etc.) close to the incident date.
- 8. Claimant is approaching retirement age.
- 9. Claimant seeking treatment by doctors recognized as pro-claimant or pro-surgery.

- 10. Doesn't like the doctor (especially when seeking second opinion after being released to work).
- 11. Excessive use of medication.
- 12. Treatment is once a month visit to physician.
- 13. Initial diagnosis of low back strain or sprain accompanied by prognosis of return to work as "uncertain" or "undetermined" or left blank by physician.
- 14. Back surgery (laminectomy, fusion, etc.) on physical laborer.
- 15. Claimant relocates to a small town.
- 16. Claimant has adjusted to reduced income (compensation).
- 17. Claimant has several credit disability policies in force.
- 18. Claimant applied for or is receiving Social Security benefits.
- 19. Claimant's spouse is also disabled.
- 20. "Chance of a lifetime" syndrome: Claimant has unrealistic aspiration of bettering self through schooling, etc.
- 21. Claimant has competitive attitude toward ABC INC. or Client Company.
- 22. Claimant has "warned" ABC Inc. or client that the job is unsafe.
- 23. "Mothering Syndrome": Spouse "adopts" spokesperson role for claimant:
  - A. Spouse calls ABC Inc. frequently.
  - B. Spouse attends meetings with claimant.
  - C. Spouse speaks for claimant.
- 24. Hypochodriacal symptoms (many vague complaints).

For further information please contact :

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